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PATENT APPLICATION **TRANSMITTAL**

Attorne	y Docket i	No.	11884/407901	7	$\hat{\omega}$	١
First In	ventor	Sve	n BERNHARD, et al.	S.	07	
Title	METHO NETWO		D SYSTEM FOR REMOTE CONFIGURATION OF EVICES	ر او	7720	_
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(Only for n	ew nonprovisional applications und	er 37 C.F.R. 1.53(b))						- 👸 		
			Expre	ess Mail L	abel No.			<u> </u>		
See MPEP c	APPLICATION EL		1	ADDRI	ESS TO	: Box Pater	Commissioner for Patents at Application on, DC 20231			
2.	Fee Transmittal Form (e.g., PTC Submit an original and a duplicate for fee Applicant claims small entity states 37 CFR 1.27. Specification [7] Operior of the Invention Cross References to Related Application Federated Statement Regarding Fed sponsor Reference to sequence listing, a tale	tus. Total Pages 15] w) cations ed R & D		7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. ☐ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper c. ☐ Statements verifying identity of above copies						
	or a computer program listing appea		Γ	ACCOMPANYING APPLICATIONS PARTS						
	Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (Detailed Description Claim(s)	if filed)		9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney						
_	Abstract of the Disclosure			11. 🗌	Ū		cument (if applicable)	20		
4. ⊠ D 5. Oath or I	• • • • • • • • • • • • • • • • • • • •] 1	12. 🗌	Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
a. 🗆	Newly executed (original or co	•		13. 🛛	Preliminar	y Amendmen	t			
b. 🗆	Copy from a prior application (-	14. 🛛	Return Receipt Postcard (MPEP 503)					
_	(for a continuation/divisional w) .	(Should be specifically itemized) 15. Certified Copy of Priority Document(s)						
i. <u>L</u>	DELETION OF INVENTO Signed statement attached deletir named in the prior application, se 1.63(d)(2) and 1.33(b).	ng inventor(s)		(if foreign priority is claimed) 16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
6. 🗌 Арг	olication Data Sheet. See 37 C	FR 1.76		17. 🗌	or its equit Other:	valent.				
	TINUING APPLICATION, check a plication Data Sheet under 37 CF		ply the	e requisite	e informatio	n below and in	a preliminary amendmen	t,		
Cross filed with the For CONTIN under Box 5	□ Continuation □ Divisional □ Continuation-in-part (CIP) of prior application No: □ Cross Reference to Related Application included in Preliminary Amendment Attached. Note: A cross reference to related application(s) must be filed with the USPTO before four months from the filing date of this continuing application. For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
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Country		Telephone				Fax				
Name (Pr	Name (Print/Type) Cassandra T. Swain			Registration No. (Attorney/Agent) 48,361						
Signature	Cass	adia I	ر	Sw	من	Date	November 25, 2003			
Burden Hour S	Statement: This form is estimated to	take 0.2 hours to comple	ata Tir	ma will var	v depending	upon the needs	of the individual case. Any			

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$770.

	Complete if Known	$\overline{}$
Application Number	To be assigned	
Filing Date	Herewith	
First Named Inventor	Sven BERNHARD, et al.	
Examiner Name	To be assigned	
Art Unit	To be assigned	
Attorney Docket No.	11884/407901	

METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued) 3. ADDITIONAL FEES								
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☐ Deposit Account:							Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid		
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Account 11-0600 1						1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.				
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Account Kenyon & Kenyon							1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action			
The Director Is authorized to: (check all that apply) ☑ Charge fee(s) indicated below ☑ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application							1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action			
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Fee Code	Fee	Fee Code	Fee (\$)	Fee Descrip	tion				1801	770	2801	385	Request for Continued Examination (RCE)	
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1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 **Reissue independent claims over					Other f	ee (spec	y)							
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SUBMITTED BY Complete (if applicable)										
Name (Print/Type)	Cassandra T. Swain, Ph.D.	Registration No. (Attorney/Agent)	48,361	Telephone	202-220-4273					
Signature	Carsade	a I Swa	\sim	Date	November 25, 2003					

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